



TOWN OF SEABROOK PUBLIC WATER SYSTEM

550 Route 107 ~ PO Box 456, Seabrook, NH 03874
Phone: (603) 474-9921 Fax: (603) 474-3399

WATER SERVICE APPLICATION

APPLICANT INFO SAME AS LANDOWNER? YES NO

DATE: 4/10/24

APPLICANT NAME/CORPORATION <u>Debra Tarshi</u>		LANDOWNER/BILLING NAME <u>Debra Tarshi</u>	
APPLICANT ADDRESS <u>308 Portsmouth Ave</u>		BILLING ADDRESS <u>308 Portsmouth Ave</u>	
HOME/WORK PHONE <u>978-771-8079</u>	HOME/WORK PHONE <u>978-771-8079</u>	CITY/STATE <u>Seabrook NH</u>	CITY/STATE <u>Seabrook NH</u>
ZIP CODE <u>103874</u>	ZIP CODE <u>103874</u>	WORK/OTHER PHONE <u>978-771-8079</u>	WORK/OTHER PHONE <u>978-771-8079</u>
E-MAIL ADDRESS OF APPLICANT <u>debra.tarshi@yahoo.com</u>		E-MAIL ADDRESS OF LANDOWNER <u>debra.tarshi@yahoo.com</u>	

SERVICE ADDRESS: 308 Portsmouth Ave ASSESSOR'S MAP-LOT-SEQ: 80-308

TYPE OF CONSTRUCTION: (Check All That Apply) NEW CONSTRUCTION RESIDENTIAL SINGLE FAMI MULTI-FAMILY COMBO

MOBILE/MANUFACTURED HOME COMMERCIAL INDUSTRIAL (Please Describe) Line Replacement

*UNDER 'ADDITIONAL COMMENTS' SECTION, LIST NO. OF BUILDINGS AND NO. OF UNITS IN EACH BUILDING, IF APPLICABLE

NO. OF STORIES IN BUILDING: 2 BUILDING SIZE IN SQUARE FEET: 3300 TOTAL PARCEL AREA IN SQUARE FEET: 24000

FIRE DEPARTMENT REQUIREMENTS NONE SPRINKLE ALL SPRINKLE GARAGE ONLY

FIRE HYDRANTS REQUIRED NONE PUBLIC (NO. OF HYDRANTS 1) PRIVATE (NO. OF HYDRANTS 0)

IS THERE A WELL ON THE PROPERTY? YES NO USING RECYCLED WATER? YES NO

WILL A PUMP BE USED TO BOOST PRESSURE? YES - FIRE SERVICE YES - DOMESTIC SERVICE NO

WILL THERE BE LANDSCAPE IRRIGATION? YES NO IF YES, NUMBER OF SPRINKLER HEADS: 0

FLOW OF EACH SPRINKLER HEAD IN GPM: 0 TOTAL IRRIGATED AREA IN SQUARE FEET: 0

IF NON-RESIDENTIAL, DESCRIBE BUSINESS TYPE OR USAGE OF LOT: Residential

SERVICES - LIST ALL REQUIRED PER PARCEL

POTABLE OR RECYCLED	SERVICE USE (RESIDENTIAL, FIRE, IRRIGATION, ETC.)	LATERAL SIZE	METER SIZE	MAX DEMAND IN GPM	ANTICIPATED DATE OF METER INSTALLATION
potable	residential		5/8"		10/21/2024

FIXTURE UNIT COUNT - COMPLETE THE QUANTITY OF THE FOLLOWING

BATHROOM:		KITCHEN:		LAUNDRY ROOM:		MISC/OTHER:	
TUBS/SHOWERS	<u>1</u>	JACUZZI TUBS	<u>3</u>	DISHWASHERS	<u>1</u>	CLOTHES WASHERS	<u>1</u>
TUBS ONLY		TOILETS	<u>3</u>	SINKS	<u>1</u>	SINKS	
SHOWERS ONLY	<u>2</u>	URINALS					
SINKS		BIDETS					
						POOL (SIZE: _____)	
						DESCRIBE:	

LAND OWNER'S SIGNATURE Debra Tarshi DATE 4/10/2024

By signing above, I agree I will not hold the Seabrook Water Department responsible for any damages to my property, which may be incurred during, or as a result of the water installation.

****ALSO: THIS APPLICATION WILL EXPIRE 2 YEARS AFTER APPROVAL BY THE BOARD OF SELECTMEN and THE FEE WILL BE NONREFUNDABLE**

CORPORATION NAME _____ OFFICER'S NAME & TITLE (PRINT) _____

APPLICANT/CORPORATION'S OFFICER SIGNATURE Debra Tarshi DATE 4/10/2024

ACCOUNT # 116550



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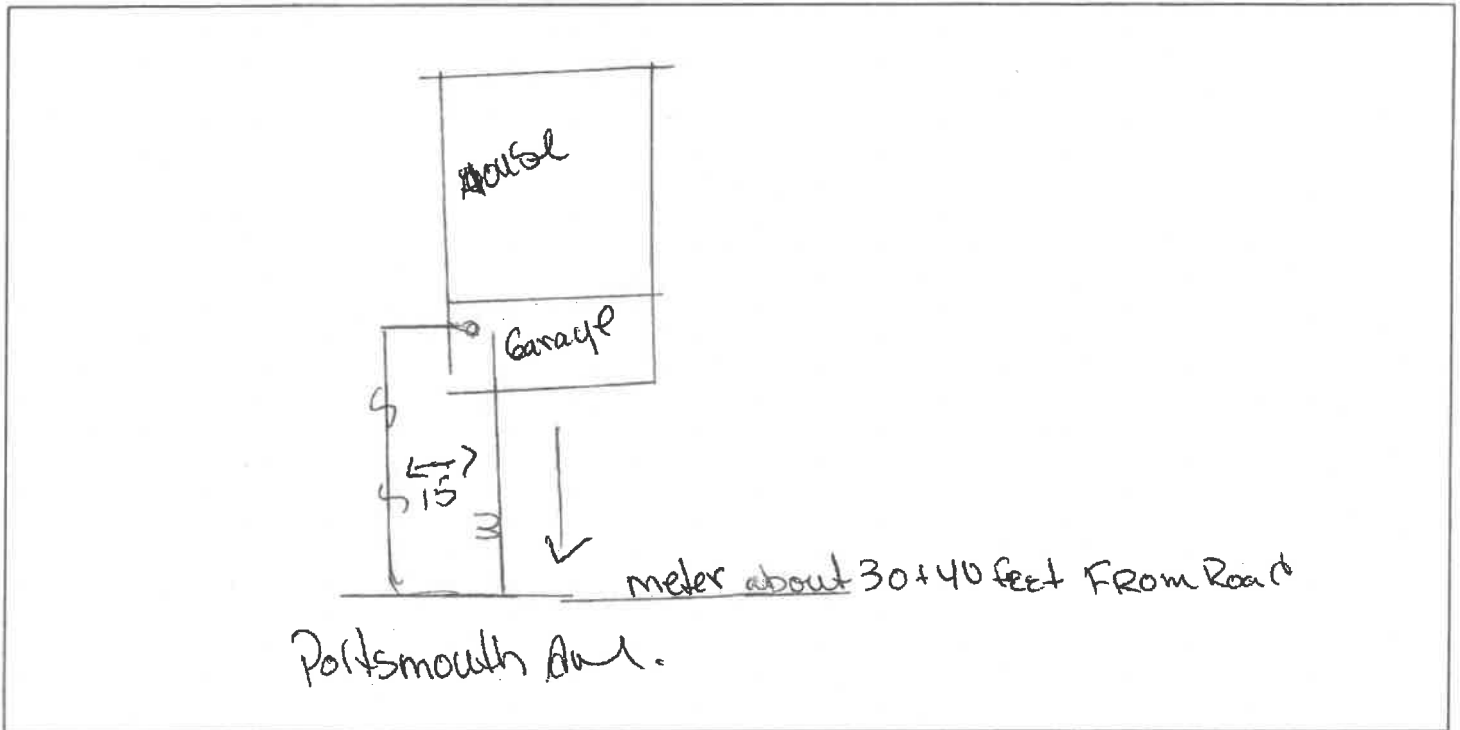
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Service Connection Ties

Address: 308 Portsmouth Ave

Please provide a sketch of the service connection with the approximate length. Please indicate the name of the street and a sketch of the house. In addition, please show the approximate distances from any sewer lines on the property.



Connection to Building

The applicant shall provide proper plumbing of building(s), which shall be in compliance with the International Plumbing Code as well as the Rules and Ordinances of the Town of Seabrook and the State of New Hampshire. Water lines are required to be inspected by the Water Department before backfilling.

-OFFICE USE ONLY-

GRANTED ___ DENIED ___ DATE _____

Board of Water Commissioners

REASON FOR DENIAL: _____

(Chairman)

[Signature] 4/15/24
Water Superintendent Date

AMOUNT PAID: 100.00

CASH/CHECK # 113

DATE RECEIVED 4/12/24

BY [Signature]